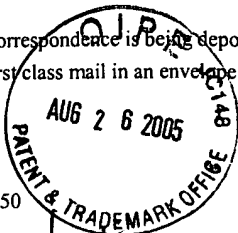


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PATENT  
Attorney Docket No.: 021770-000120US

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



On 8/24/05

TOWNSEND and TOWNSEND and CREW LLP

By: [Signature]  
Tiffany Wu

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

EITAN KONSTANTINO ET AL.

Application No.: 10/810,330

Filed: June 25, 2004

For: APPARATUS AND METHODS  
FOR TREATING HARDENED  
VASCULAR LESIONS

Examiner: Unassigned

Art Unit: 3731

SUPPLEMENTAL INFORMATION  
DISCLOSURE STATEMENT UNDER 37  
CFR §1.97 and §1.98

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are not enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

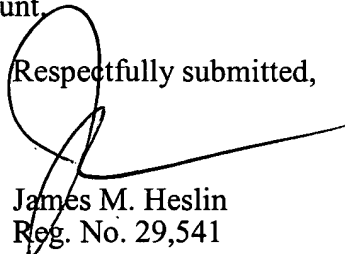
As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.

However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



James M. Heslin  
Reg. No. 29,541

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Two Embarcadero Center, Eighth Floor  
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JMH:tfw  
60569735 v1



<b>Substitute for form 1449A/PTO</b>  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)			<b>Complete if Known</b>		
			Application Number	10/810,330	
			Filing Date	June 25, 2004	
			First Named Inventor	KONSTANTINO, EITAN	
			Art Unit	3731	
			Examiner Name	Unassigned	
Sheet	1	of	2	Attorney Docket Number	021770-000120US

U.S. PATENT DOCUMENTS+					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code <sup>2</sup> (if known)			
	1	5,108,416	04-28-1992	Ryan et al.	
	2	5,456,667	10-10-1995	Ham et al.	
	3	5,571,086	11-05-1996	Kaplan et al.	
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	5	6,071,285	06-06-2000	Lashinski et al.	
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	16	6,648,912 B2	11-18-2003	Trout, III et al.	
	17	2002/0038144 A1	03-28-2002	Trout, III et al.	
	18	2002/0165599 A1	11-07-2002	Nasralla	
	19	2003/0074046 A1	04-17-2003	Richter	
	20	2003/0105509 A1	06-05-2003	Jang et al.	
	21	2003/0149468 A1	08-07-2003	Wallsten	
	22	2003/0171799 A1	09-11-2003	Lee et al.	
	23	2003/0195609 A1	10-16-2003	Berenstein et al.	
	24	2003/0199970 A1	10-23-2003	Shanley	
	25	2003/0199988 A1	10-23-2003	Devonec et al.	
	26	2003/0208255 A1	11-06-2003	O'Shaughnessy et al.	

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				
								<input type="checkbox"/>
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Kind Codes of U.S. Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.  
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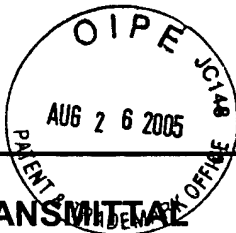
Substitute for form 1449B/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>		<b>Complete if Known</b>			
		<i>Application Number</i>	10/810,330		
		<i>Filing Date</i>	June 25, 2004		
		<i>First Named Inventor</i>	KONSTANTINO, EITAN		
		<i>Art Unit</i>	3731		
		<i>Examiner Name</i>	Unassigned		
Sheet	2	of	2	<i>Attorney Docket Number</i>	021770-000120US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.); date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

Examiner Signature		Date Considered	
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<sup>1</sup> EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>2</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.



JRW

PTO/SB/21 (09-04)

**TRANSMITTAL  
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(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

6

Application Number

10/810,330

Filing Date

June 25, 2004

First Named Inventor

KONSTANTINO, EITAN

Art Unit

3731

Examiner Name

Unassigned

Attorney Docket Number

021770-000120US

**ENCLOSURES (Check all that apply)**

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|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form                                     | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to TC                            |
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| <input type="checkbox"/> Extension of Time Request                                | <input type="checkbox"/> Terminal Disclaimer  | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):         |
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

Townsend and Townsend and Crew LLP

Signature

Printed name

James M. Heslin

Date

August 24, 2005

Reg. No.

29,541

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Tiffany Wu

Date

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